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REISSUE PATENT APPLICATION TRANSMITTAL					
ADDRESS TO:	Attorney Docket No.	224966			
Mail Stop Reissue	First Named Inventor	LAMPPRECHT, Alfred			
Commissioner for Patents	Original Patent No.	6,568,620 B1			
P.O. Box 1450 Alexandria, VA 22313-1450	Original Patent Issue Date (Month/Day/Year)	5/27/2003			
,	Express Mail Label No.	EV 336874975 US			
APPLICATION FOR REISSUE OF: ☐ Utility Patent ☐ Design Patent ☐ Plant Patent (Check applicable box)					
APPLICATION ELEMENTS	ACCOMPANYING	APPLICATION PARTS			
 Transmittal Form with Fee Applicant claims small entity status. See 37 CFR 1.27. 		status/support for all e claims. See 3(c)			
3. Specification and Claims in double column copy of patent format (amended, if appropriate)	8. Original U.S. Pate Ribboned				
 4.	9. Foreign Priori (If applicable) 10. Information D Form PTC Copies of 11. English Trans	Listed Documents slation of Reissue Oath/			
☑ Power of Attorney	Declaration (h 12. Preliminary A 13. Return Recei	mendment pt Postcard			

Instructions for Calculating Claim Fees:
If Total Claims In Patent is greater than 20, use Number Filed In Reissue Application minus Total Claims In Patent; if Claims In Patent is less than 20, use Number Filed In Reissue Application minus 20.

	C	LAIMS AS FILED - PART	Г1		
BASIC FEE					\$770.00
	CLAIMS IN PATENT	NUMBER FILED IN REISSUE APPLICATION	Number Extra	RATE	
TOTAL CLAIMS	17	39	. 19	x\$18.00	\$342.00
INDEPENDENT CLAIMS	1	5	2	x\$86.00	\$172.00
		Total	al of above ca	alculations =	\$1,284.00
Reduction by 50% for filing by small entity =				(\$0.00)	
* ***				TOTAL =	\$1,284.00

	CLAIMS	AS AMENDED - PAI	RT 2	·		
		HIGHEST NUMBER	EXTRA			
•	CLAIMS REMAINING	PREVIOUSLY PAID	CLAIMS			
· ·	AFTER AMENDMENT	FOR	PRESENT	RATE		
TOTAL CLAIMS				x\$18.00	\$	
INDEPENDENT CLAIMS	_			x\$86.00	\$	
Total of above calculations =				\$		
Reduction by 50% for filing by small entity =				(\$)	
				TOTAL =	\$	

REISSUE PATENT APPLICATION TRANSMITTAL Patent No. 6,568,620 B1 Client Reference No. MEMM PA 100a US wa Attorney Docket No. 224966 Please charge my Deposit Account No. 12-1216 in the amount of \$1,284.00. A duplicate copy of this sheet is enclosed. 19. A check in the amount of \$ is enclosed. 20. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216: Fees required under 37 CFR 1.16. Fees required under 37 CFR 1.17. 21. CORRESPONDENCE ADDRESS ⊠Customer Number: 23460 Dennis R. Schlemmer, Reg. No. 24,703 Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 23460 180 North Stetson Avenue Chicago, Illinois 60601-6780 Telephone: (312) 616-5600 Facsimile: (312) 616-5700 Name Dennis R. Schlemmer, Reg. No. 24,703 Signature Óctober 28, 2003 Date

Certificate of Mailing Under 37 CFR 1.10

I hereby certify that this Reissue Patent Application Transmittal and all accompanying documents are being deposited with the United States Postal Service "Express Mail Post Office To Addressee" Service under 37 CFR 1.10 on the date indicated below and is addressed to: Mail Stop Reissue, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Rick D. Madsen	Kut P. Madsen	October 28, 2003
Name of Person Signing	Signature	Date

Reissue Transmittal (Revised 10/1/03)